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Olga Hugelmeyer Superintendent of Schools

Marvin Lehman Supervising General Counsel/ **Board Attorney**

Vito A. Mazza Heather Savage-Ford Associate Counsel

January 30, 2014

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12th Street, SW Washington DC 20554

Re:

CC Docket No. 02-6

Elizabeth Public SchoolsBoard of Education

Our File No.: HSF/HSF/54-2399

Dear Ms. Dortch:

I am writing on behalf of the Elizabeth Board of Education ("Board") to request a waiver on the submission of our Form 471 for Funding Year 2011-2012. On December 4, 2013, Universal Service Administrative Company (USAC) sent a response to the Board indicating that our Form 471 application was "received or postmarked AFTER the deadline..." The Board does its best to keep track of the important deadlines and has not missed a submission deadline to the USAC. Due to extenuating circumstances in 2012, the Board missed the filing window.

Explanation

The following E-Rate application numbers were not filed on time due to district reorganization: 935771, 935772, 935769, 935749, 935770, 935750 and 935751. The Board's Director of Technology was responsible for the filing of Form 471. She and her secretary resigned in January 2012 under very strained circumstances, including, but not limited to evidence of fraudulant activity, illegal access to information of the Board, dissemination of privileged material and making false accusations against other employees of the Board. Due to the unfortunate circumstances surrounding her resignation, the Board's Technology Department was in brief turmoil. These incidences coincided with the timely filing of the Board's Form 471.

> No. of Copies rec'd List ABCDE

Marlene H. Dortch, Secretary Wednesday, January 15, 2014 Page 2 of 2

The USAC window to file a Form 471 was January to March 20, 2012. The newly appointed Director of Technology and secretary were not aware of the E-Rate procedures and only became cognizant of the deadline to file the Form 471 after they attended the USAC training. Immediately, upon discovering that the Form 471 was not filed for Funding Year 2012, seven (7) different Form 471 applications were submitted via mail on October 29, 2013.

The Board's applications are currently showing up on the USAC website application status at "Incomplete." USAC responded to our submission as being postmarked <u>after</u> the application deadline.

The Board is requesting a waiver of the filing window deadline because: (1) reorganization and resignation are circumstances beyond the control of the Board/District and (2) the failure to meet the application deadline was procedural not substantive.

As an Urban School District, we count on this source of funding each year tremendously and am hopeful that you will approve this waiver request. I have attached the seven (7) applications submitted by the Board, which include vendors and refundable amounts, deadline dates and the dates we submitted the documents. (See Exhibits 1-7) I have also attached a copy of Board's application status as indicated on the USAC website. (See Exhibit 8)

If you require any additional information, please feel free to contact me.

Thank you in advance for your consideration.

Very truly yours,

Marvin Lehman

Supervising General Counsel/Board Attorney

cc: Harold E. Kennedy, Jr., School Business Admin./Board Secretary (via fax, w/out encls.) William A. Greene, Jr., Comptroller (via e-mail, w/encls.)

Elizabeth Board of Education v. FCC; CC Docket No.: 02-6

TABLE OF CONTENTS

Exhibit	ţ
Verizon Local Form 471 Application Number: 935772	l
ightpath Fiber Form 471 Application Number: 935771	2
erizon Voice Internet Form 471 Application Number: 935750	,
entrex Form 471 Application Number: 935749	ŀ
Verizon Wireless Form 471 Application Number: 945770	,
Veb Hosting Form 471 Application Number: 935751)
Verizon Long Distance Form 471 Application Number: 945769	7
SAC Online Application Status	3

Entity Number 122796 Applicant's Form Identifier VERIZON LOCAL									
Contact	Person ALBERTO MARSAL Phon	ne Nur	mber 908 436-5061						
Block 5: Discount Funding Request(s) Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts. Make as many copies of this page as needed, and number the completed pages to assure that they are all processed correctly.									
If this is a duplicate Funding Request (e.g., of an FRN that is not yet approved, under appeal, etc.), check this box and enter the original FRN in the space provided:									
11	Category of Service (only ONE category should be checked)	Γ	23 Calculations						
	PRIORITY 1 Telecommunications Service PRIORITY 2 Internal Connections Other than Basic Maintenance		A. Monthly charges (total amount per month for service)						
4	Internet Access Basic Maintenance of Internal Connections		13,746.81						
12	Form 470 Application Number	Charges	B. How much of the amount in A is ineligible? 236, 85						
13	SPIN - Service Provider Identification Number		2,36,83						
14	143801362 Service Provider Name	Recurring	C. Eligible monthly pre-discount amount (A minus B)						
		1	D. Number of months service provided in funding year /2						
	VERIZON NEW TERSEY, INC.		E. Annual pre-discount amount for eligible recurring charges (C x D)						
15a	Check this box if this Funding Request is for non-contracted tariffed or month-to-month services.								
15b	NJ-CORPREWARDS 05012007	Non-Recurring Charged	F. Annual non-recurring charges - 0.00						
15c	Check this box if this Funding Request is covered under a master contract (a contract negotiated by a third party, the terms and conditions of which are then made available to an eligible entity that purchases directly from the service provider).		G. How much of the amount in F is ineligible?						
15d	Check this box if this Funding Request is a continuation of an FRN from a previous funding year based on a multi-year contract. If so, provide that FRN here:		-0.00						
16a	Billing Account Number (e.g., billed telephone number)								
	908-436-5000								
16b	Check this box if there are multiple Billing Account Numbers and attach a complete list of those numbers to this page.		H. Annual eligible pre-discount amount for non-recurring charges (F minus G)						
17	Allowable Vendor Selection/Contract Data (mm/dd/yyyy)		-0.00						
18	Contract Award Date (mm/dd/yyyy) 01 20 201	2	Total funding year pre-discount amount (E + H)						
19	Service Start Date (mm/dd/yyyy) 07/01/2012		162,119.47						
20a	Service End Date (mm/dd/yyyy)	Total Charges	J. Discount from Block 4 Worksheet 90						
20b	Contract Expiration Date (mm/dd/yyyy) 06/30/2012	1 -	K. Funding Commitment Request (I x J) 145, 907.52						
must									
- 22	a. If the service is site-specific (provided to one site								

Entity	Number	1227	96		Applicant's	Form Identifi	ler	VERIZO	THE RESIDENCE IN COLUMN 2 IN C	THE OWNER WHEN PERSONS NAMED IN	THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	-
Contac	ct Person	ALBER	eto Marsi	AL	-	Phone Numi	ber	908	43	36-50	61	-
Blo	çk 6:	Certific	ations ar	nd Sign	ature		e-para-a-par-a-a-					
24	I certify the	at the entities list	ed in Block 4 of thi	s application a	re eligible for	support because	they are	: (Check on	e or bo	th.)		
	a sci 78	hoois under the s 01(18) and (38),	tatutory definitions that do not operat	of elementary e as for-profit t	y and seconda businesses an	ry schools found d do not have er	in the N	o Child Left ats exceeding	Behir \$50 r	nd Act of 2 million; and	2001, 20 U.S Mor	.C. §§
	Ac	t of 1996 that do	onsortia eligible for not operate as for ry, secondary sch	-profit business	ses and whose	e budgets are co	ve agenc impletely	y under the I separate fro	Library om any	Services a schools, it	and Technolo ncluding, but	ogy t not
25	resources, purchased the entities which acco	including computer including com	resent or the entition sters, training, soft cognize that some plication have sec sured in the current provider(s).	ware, internal of of the aforeme sured access to	connections, nantioned resource all of the resource	naintenance, and ross are not elig ources to pay the	d electric pible for s e discour	al capacity, i upport. I cei ited charges	necess rtify that for elig	ary to use at the entiti gible service	the services les I represer ces from fund	nt or ds to
			count amount on the		nding Request	s.)		162	2	19.4	17]
b			request amount o s 23K on all Block			its.)		145	, 98	07.5	2]
С	Total app (Subtract	licant non-discou Item 25b from It	nt share em 25a.)					ile,	21	1.95		
d	Total bud	geted amount al	ocated to resource	es not eligible f	for E-rate supp	port			0	.00		_
•	services	requested on this	or the applicant to application AND to we use of the disco	to secure acce	ss to the reso	urces		16,	211	. 95]
f	Billed	k this box if you i Entity for this funds i	are receiving any nding year, or if a n item 25e.	of the funds in service provide	Item 25e dire er listed on an	ctly from a servic y of the Forms 4	ce provid 71 filed b	er listed on a by this Billed	iny of t Entity	he Forms for this fun	471 filed by a ding year as	this sisted
_	covered by	technology plan	ommission rules, s that do or will co d body or an SLD	ver all 12 mont	ths of the fund	ing year, and the	at have b	een or will b	e appr	oved		
d	Or los	ertify that no tech	nology plan is requ	ired by Comm	nission rules.							
27	received a	nd selecting a se	posted my Form 4 rvice provider. I co se primary factor c	ertify that all bi	ds submitted v	were carefully co	onsidered	and the mo	st cost	effective s	service offeri	ng was
28			nsible for selecting						nd loc	al procure	ment/compe	titive
29	not be sold §§ 54.500 anything o	d, resold or trans , 54.513. Addition of value, other the	e applicant purcha ferred in considera naily, I certify that in services and eq a connection with the	ition for money the entity or er uipment sough	or any other ntities listed or nt by means of	thing of value, ex this application	xcept as have no	permitted by t received ar	the Conything	ommission of value o	's rules at 47 or a promise	C.F.R
30	discount for except for	unding and/or ca those services p	(ies) I represent h ncellation of fundir rovided under non in civil or criminal i	ng commitment -contracted tar	ts. There are riffed or month	signed contracts -to-month arrang	covering gements	g all of the so I acknowle	ervices	listed on t	his Form 47	1



December 4, 2013

ALBERTO MARSAL ELIZABETH SCHOOL DISTRICT 500 NORTH BROAD STREET ELIZABETH, NJ 07208-3302

Re: Applicant's Form Identifier: VERIZON LOCAL

Form 471 Application Number: 935772

We're sending this letter to notify you that your FCC Form 471 application and/or certification was received or postmarked AFTER the deadline for an application to to be considered as filed within the window. Applications submitted outside of the filing window will not be considered for funding unless funds remain after considering all in-window applications.

TO REQUEST A WAIVER OF THE FILING WINDOW DEADLINE:

The window filing requirement is contained in the Federal Communication Commission (FCC) rules for the E-rate program. USAC cannot consider requests for waivers of FCC rules. If you missed the FCC Form 471 filing window deadline and wish to request a waiver, you may file a waiver request with the FCC. You should refer to CC Docket No. 02-6 on the first page of your waiver request. We strongly recommend that you review "Appeals" posted in the Reference Area of the SLD section of the USAC website for electronic filing options and additional information on waiver requests.

TO APPEAL THIS DECISION:

If you disagree with the decision indicated in this letter - for example, if you believe that you postmarked your FCC Form 471 on or before the filing window deadline - you have the option of filing an appeal with USAC or with the FCC.

If you wish to appeal to USAC, your appeal must be received by USAC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. In your letter of appeal:

- 1. Include the name, address, telephone number, fax number, and email address for the person who can most readily discuss this appeal with us.
- State outright that your letter is an appeal. Include the following to identify the decision letter and the decision you are appealing:

Appellant name,
 Applicant or service provider name,

- BĒÑ,

- Application number 935772 as assigned by USAC,
 "Funding Year 2012 FCC Form 471 Postmarked Outside of Window Letter,"
 AND
- The exact text or the decision that you are appealing.
- Please keep your letter to the point, and provide documentation to support your appeal. Be sure to keep a copy of your entire appeal, including any correspondence and documentation.
- 4. If you are an applicant, please provide a copy of your appeal to the service provider(s) affected by USAC's decision. If you are a service provider, please provide a copy of your appeal to the applicant(s) affected by USAC's decision.
- 5. Provide an authorized signature on your letter of appeal.

To submit your appeal to us by fax, fax your appeal to (973)599-6542.

To submit your appeal to us on paper, send your appeal to: Letter of Appeal Schools and Libraries Division - Correspondence Unit 30 Lanidex Plaza West PO Box 685 Parsippany, NJ 07054-0685

If you wish to appeal to the FCC, you should refer to CC Docket No. 02-6 on the first page of your appeal. Your appeal must be received by the FCC or postmarked within 60 days of the above date on this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. We strongly recommend that you use the electronic filing options described in "Appeals" posted on our website. If you are submitting your appeal via United States Postal Service, send to: FCC, Office of the Secretary, 445 12th Street SW, Washington, DC 20554.

Schools and Libraries Division Universal Service Administrative Company

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Entity Number 122796 Applicant's Form Identifier Light PATA FIBEL Contact Person ALBERTO MARSAL Phone Number 905 436 5041								
Block 5: Discount Funding Request(s) Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts. Make as many copies of this page as needed, and number the completed pages to assure that they are all processed correctly.								
10 If this is a duplicate Funding Request (e.g., of an FRN that is not yet approved, under appeal, etc.), check this box and enter the original FRN in the space provided:								
11	Category of Service (only ONE category should be checked)		23 Calculations					
100	PRIORITY 1 Telecommunications Service PRIORITY 2 Internal Connections Other than Basic Maintenance		A. Monthly charges (total amount per month for service)					
	Internet Access Basic Maintenance of Internal Connections	88	63,070.12					
	Form 470 Application Number	ng Charges	B. How much of the amount in A is ineligible?					
	SPIN - Service Provider Identification Number 143013604	Recurring	C. Eligible monthly pre-discount amount (A minus B) 63,070,12					
14	Service Provider Name		D. Number of months service provided in funding year /2					
S	CABLENSION LIGHTPATH OF NJ		E. Annual pre-discount amount for eligible recurring charges (C x D)					
15a	Check this box if this Funding Request is for non-contracted tariffed or month-to-month services. Contract Number	1	F. Annual non-recurring charges					
15b	49520	g Charge						
15c	Check this box if this Funding Request is covered under a master contract (a contract negotiated by a third party, the terms and conditions of which are then made systable to an eligible entity that purchases directly from the service provider).	Non-Recurring	G. How much of the amount in F is ineligible?					
15d	Check this box if this Funding Request is a continuation of an FRN from a previous funding year based on a multi-year contract. If so, provide that FRN hare:	Mon	-0.00					
16a	Billing Account Number (e.g., billed telephone number) 49520							
16b	Check this box if there are multiple Billing Account Numbers and attach a complete list of those numbers to this page.		H. Annual eligible pre-discount amount for non-recurring charges (F minus G)					
17	Allowable Vendor Selection/Contract Date (mm/dd/yyyy) // 26 / 2009		-0.00					
18	Contract Award Date (mm/dd/yyyy) Oi/ 21/2010	Ι.	Total funding year pre-discount amount (E + H)					
19	Service Start Date (mm/dd/yyyy) 07/01/2011	T in	756841,47					
208	Service End Date (mm/dd/yyyy)	1 00	J. Discount from Block 4 Worksheet 90					
20b	Contract Expiration Date (mm/dd/yyyy) O6/30/2015		K. Funding Commitment Request (I x J) 681, 157 - 32					
must	Description of This Service: NOTE: All Item 21 Attachments mus AUST attach a description of the service, including a breakdown of components, include any additional account or telephone numbers if the billed account has mo per, and note number in space provided.	costs, utiple r	manufacturer name, make and model number. You numbers. Label the description with an Attachment $24 - FIBER$					
22 Entity/Entities Receiving This Service: a. If the service is atte-specific (provided to one site and not shared by others), list the Entity Number of the entity from Block 4 receiving this service: b. If the service is shared by sit entities on a Block 4								

Entity N	lumber	122	-796		Applicant's Form Id	entifier	LIGHTPATI	4 FIBER		
Contact	t Person	ALBE	RTO MAL	esal	Phone I	Number	9084	36-5061		
24 25	l certify the sci resources, purchased the entities which accounts.	nools under the si 01(18) and (38), it raries or library co t of 1996 that do sited to, elemental at the entity I repri, including compute i effectively. I rec silisted on this ap	d in Block 4 of the statutory definition that do not operate as find the statutory secondary sec	his application as of elements ate as for-profit for assistance pr-profit busine phools, college lities listed on to fitware, internar accured access	are eligible for support being and secondary schools to businesses and do not he from a State library adminisses and whose budgets as, or universities. This application have secured connections, maintenance resources are not all of the resources to all others.	found in the I ave endowme istrative agen are completel ed access, as ce, and electri tot eligible for pay the discou	No Child Left Behin onts exceeding \$50 m cy under the Library of y separate from any operately or through to cal capacity, necessic support. I certify that unted charges for elic	d Act of 2001, 20 U.S.C. §§ sillion; and/or Services and Technology schools, including, but not this program, to all of the		
	Total fun (Add the	ding year pre-disc entries from Item	count amount on s 231 on all Bloc	this Form 471 k 5 Discount F	unding Requests.)		756,841	1.47		
b		ding commitment entries from Item			471 Funding Requests.)		681,157	.32		
c		olicant non-discou t Item 25b from Ite					75684.	15		
d	d Total budgeted amount allocated to resources not eligible for E-rate support - 0.00							00		
•	Total amount necessary for the applicant to pay the non-discount share of the services requested on this application AND to secure access to the resources necessary to make effective use of the discounts. (Add Items 25c and 25d.)									
•	Check this box if you are receiving any of the funds in Item 25e directly from a service provider listed on any of the Forms 471 filed by this Billed Entity for this funding year, or if a service provider listed on any of the Forms 471 filed by this Billed Entity for this funding year assisted you in locating funds in Item 25e.									
I certify that, if required by Commission rules, all of the individual schools and libraries receiving services under this form are covered by technology plans that do or will cover all 12 months of the funding year, and that have been or will be approved by a state or other authorized body or an SLD-certified technology plan approver prior to the commencement of service. Or I certify that no technology plan is required by Commission rules. I certify that (if applicable) I posted my Form 470 and (if applicable) made any related RFP available for at least 28 days before considering all bids received and selecting a service provider. I certify that all bids submitted were carefully considered and the most cost-effective service offering was selected, with price being the primary factor considered, and is the most cost-effective means of meeting educational needs and technology plan										
28 29	goals. 28 I certify that the entity responsible for selecting the service provider(s) has reviewed all applicable FCC, state, and local procurement/competitive bidding requirements and that the entity or entities listed on this application have compiled with them.									
30	discount except fo	funding and/or co or those services p	ancellation of fur provided under r	nding commitm non-contracted	ed with all program rules a sents. There are signed or tariffed or month-to-month by the appropriate law en	ontracts cover h arrangemen	ring all of the services its. I acknowledge th			



December 4, 2013

ALBERTO MARSAL ELIZABETH SCHOOL DISTRICT 500 NORTH BROAD STREET ELIZABETH, NJ 07208-3302

Re: Applicant's Form Identifier: LIGHTPATH FIBER

Form 471 Application Number: 935771

We're sending this letter to notify you that your FCC Form 471 application and/or certification was received or postmarked AFTER the deadline for an application to to be considered as filed within the window. Applications submitted outside of the filing window will not be considered for funding unless funds remain after considering all in-window applications.

TO REQUEST A WAIVER OF THE FILING WINDOW DEADLINE:

The window filing requirement is contained in the Federal Communication Commission (FCC) rules for the E-rate program. USAC cannot consider requests for waivers of FCC rules. If you missed the FCC Form 471 filing window deadline and wish to request a waiver, you may file a waiver request with the FCC. You should refer to CC Docket No. 02-6 on the first page of your waiver request. We strongly recommend that you review "Appeals" posted in the Reference Area of the SLD section of the USAC website for electronic filing options and additional information on waiver requests.

TO APPEAL THIS DECISION:

If you disagree with the decision indicated in this letter - for example, if you believe that you postmarked your FCC Form 471 on or before the filing window deadline - you have the option of filing an appeal with USAC or with the FCC.

If you wish to appeal to USAC, your appeal must be received by USAC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. In your letter of appeal:

- Include the name, address, telephone number, fax number, and email address for the person who can most readily discuss this appeal with us.
- 2. State outright that your letter is an appeal. Include the following to identify the decision letter and the decision you are appealing:

Appellant name,

- Applicant or service provider name,

- BEN,

- Application number 935771 as assigned by USAC,
 "Funding Year 2012 FCC Form 471 Postmarked Outside of Window Letter,"
 AND
- The exact text or the decision that you are appealing.
- Please keep your letter to the point, and provide documentation to support your appeal. Be sure to keep a copy of your entire appeal, including any correspondence and documentation.
- 4. If you are an applicant, please provide a copy of your appeal to the service provider(s) affected by USAC's decision. If you are a service provider, please provide a copy of your appeal to the applicant(s) affected by USAC's decision.
- 5. Provide an authorized signature on your letter of appeal.

To submit your appeal to us by fax, fax your appeal to (973)599-6542.

To submit your appeal to us on paper, send your appeal to: Letter of Appeal Schools and Libraries Division - Correspondence Unit 30 Lanidex Plaza West PO Box 685 Parsippany, NJ 07054-0685

If you wish to appeal to the FCC, you should refer to CC Docket No. 02-6 on the first page of your appeal. Your appeal must be received by the FCC or postmarked within 60 days of the above date on this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. We strongly recommend that you use the electronic filing options described in "Appeals" posted on our website. If you are submitting your appeal via United States Postal Service, send to: FCC, Office of the Secretary, 445 12th Street SW, Washington, DC 20554.

Schools and Libraries Division Universal Service Administrative Company

Block 5: Discount Funding Request(s) Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts. Make as many copies of this page as needed, and number the completed pages to assure that they are all processed correctly.									
10	If this is a duplicate Funding Request (e.g., of an FRN that is not etc.), check this box and enter the original FRN in the space prov	yet ap	pproved, under appeal,						
11	Category of Service (only ONE category should be checked)		23 Celculations						
· dy	PRIORITY 1 Telecommunications Service PRIORITY 2 Internal Connections Other than Basic Maintenance	A. Monthly charges (total amount per month for service)							
1	Internet Access Basic Maintenance of Internal Connections		12,786.85						
12	Form 470 Application Number	ng Charge	B. How much of the amount in A is ineligible?						
13	SPIN - Service Provider Identification Number 143001197 Service Provider Name	Recurring	C. Eligible monthly pre-discount amount (A minus B)						
14			D. Number of months service provided in funding year 12						
	VERIZON BUSINESS GlobAL, LLC	E. Annual pre-discount amount for eligible recurring charges (C x D)							
15a	Check this box if this Funding Request is for non-contracted tariffed or month-to-month services.								
15b	Contract Number 59 24 89-80	Von-Recurring Charge	F. Annual non-recurring charges -0,00						
15c	Check this box if this Funding Request is covered under a master contract (a contract negotiated by a third party, the terms and conditions of which are then made available to an eligible entity that purchases directly from the service provider). Check this box if this Funding Request is a continuation of an PRN from a previous funding year based on a multi-year contract. If so, provide that PRN hare:		G. How much of the amount in F is ineligible?						
15d									
16a	Billing Account Number (e.g., billed telephone number) 18259×25		1						
16b	Check this box if there are multiple Biffling Account Numbers and attach a complete list of those numbers to this page.		H. Annual eligible pre-discount amount for non-recurring charges (F minue G)						
17	Allowable Vendor Selection/Contract Date (mm/dd/yyyy) 12/24/2012								
18	Contract Award Date (mm/dd/yyyy) 02/10/2009		Total funding year pre-discount amount (E + H)						
19	Service Start Date (mm/dd/yyyy) / 2012	Charges	153,442.20						
20a	Service End Date (mm/dd/yyyy)	0.00	J. Discount from Block 4 Worksheet						
20b	Contract Expiration Date (mm/dd/yyyy) 06/30/2014	-	K. Funding Commitment Request (I x J) 138,097.98						
mus		oets, n tiple n	nanufacturer name, make and model number. You umbers. Label the description with an Attachment 21 - VERIZON Vo.						
Number, and note number in space provided. 2. Entity/Entities Receiving This Service: a. If the service is alte-specific (provided to one site and not shared by others), list the Entity Number of the entity from Block 4 receiving this service:									

	lentifier VERIZON VOICE INTERNET							
Contact Person Alberto Marsal Phone	Number 908 - 436 - 506)							
Block 6: Certifications and Signature								
24 1 certify that the entities listed in Block 4 of this application are eligible for support be	cause they are: (Check one or both.)							
a schools under the statutory definitions of elementary and secondary schools 7801(18) and (38), that do not operate as for-profit businesses and do not be								
b ilibraries or library consortia eligible for assistance from a State library admini Act of 1996 that do not operate as for-profit businesses and whose budgets a limited to, elementary, secondary schools, colleges, or universities.	istrative agency under the Library Services and Technology are completely separate from any achools, including, but not							
I certify that the entity I represent or the entities listed on this application have secure resources, including computers, training, software, internal connections, maintenance purchased effectively. I recognize that some of the aforementioned resources are not the entities listed on this application have secured access to all of the resources to p which access has been secured in the current funding year. I certify that the Billed E and services to the service provider(s).	e, and electrical capacity, necessary to use the services of eligible for support. I cartify that the entities I represent or eay the discounted charges for eligible services from funds to							
a Total funding year pre-discount amount on this Form 471 (Add the entries from Items 23I on all Block 5 Discount Funding Requests.)	153,442.20							
b Total funding commitment request amount on this Form 471 (Add the entries from items 23K on all Block 5 Discount Funding Requests.)	138,097.98							
Total applicant non-discount share (Subtract item 25b from item 25a.)	15,344,22							
d Total budgeted amount allocated to resources not eligible for E-rate support	0.00							
Total amount necessary for the applicant to pay the non-discount share of the services requested on this application AND to secure access to the resources necessary to make effective use of the discounts. (Add Items 25c and 25d.)	15,344.22							
Check this box if you are receiving any of the funds in Item 25e directly from a service provider listed on any of the Forms 471 filed by this Billed Entity for this funding year, or if a service provider listed on any of the Forms 471 filed by this Billed Entity for this funding year assisted you in locating funds in Item 25e.								
I certify that, if required by Commission rules, all of the individual schools and libraries covered by technology plans that do or will cover all 12 months of the funding year, as by a state or other authorized body or an SLD-certified technology plan approver prior	nd that have been or will be approved							
Or lateral or certify that no technology plan is required by Commission rules.								
1 certify that (if applicable) I posted my Form 470 and (if applicable) made any related RFP available for at least 28 days before considering all bids excelved and selecting a service provider. I certify that all bids submitted were carefully considered and the most cost-effective service offering was selected, with price being the primary factor considered, and is the most cost-effective means of meeting educational needs and technology plan goals.								
I certify that the entity responsible for selecting the service provider(s) has reviewed a oldding requirements and that the entity or entities listed on this application have com-	all applicable FCC, state, and local procurement/competitive uplied with them.							
certify that the services the applicant purchases at discounts provided by 47 U.S.C. not be sold, resold or transferred in consideration for money or any other thing of value §§ 54.500, 54.513. Additionally, I certify that the entity or entities listed on this applicantything of value, other than services and equipment sought by means of this form, fithereof or any consultant in connection with this request for services.	ue, except as permitted by the Commission's rules at 47 C.F.R.							
i certify that I and the entity(les) I represent have compiled with all program rules and discount funding and/or cancellation of funding commitments. There are signed contexcept for those services provided under non-contracted tariffed or month-to-month and the context of th	tracts covering all of the services listed on this Earn 474							



December 4, 2013

ALBERTO MARSAL ELIZABETH SCHOOL DISTRICT 500 NORTH BROAD STREET ELIZABETH, NJ 07208-3302

Re: Applicant's Form Identifier: VERIZON VOICE INTERNET

Form 471 Application Number: 935750

We're sending this letter to notify you that your FCC Form 471 application and/or certification was received or postmarked AFTER the deadline for an application to to be considered as filed within the window. Applications submitted outside of the filing window will not be considered for funding unless funds remain after considering all in-window applications.

TO REQUEST A WAIVER OF THE FILING WINDOW DEADLINE:

The window filing requirement is contained in the Federal Communication Commission (FCC) rules for the E-rate program. USAC cannot consider requests for waivers of FCC rules. If you missed the FCC Form 471 filing window deadline and wish to request a waiver, you may file a waiver request with the FCC. You should refer to CC Docket No. 02-6 on the first page of your waiver request. We strongly recommend that you review "Appeals" posted in the Reference Area of the SLD section of the USAC website for electronic filing options and additional information on waiver requests.

TO APPEAL THIS DECISION:

If you disagree with the decision indicated in this letter - for example, if you believe that you postmarked your FCC Form 471 on or before the filing window deadline - you have the option of filing an appeal with USAC or with the FCC.

If you wish to appeal to USAC, your appeal must be received by USAC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. In your letter of appeal:

- Include the name, address, telephone number, fax number, and email address for the person who can most readily discuss this appeal with us.
- State outright that your letter is an appeal. Include the following to identify the decision letter and the decision you are appealing:

 Appellant name, Applicant or service provider name,
 BEN,

Schools and Libraries Division - Correspondence Unit 30 Lanidex Plaza West, PO Box 685, Parsippany, NJ 07054-0685 Visit us online at: www.usac.org/sl

- Application number 935750 as assigned by USAC,
 "Funding Year 2012 FCC Form 471 Postmarked Outside of Window Letter,"
 AND
- The exact text or the decision that you are appealing.
- Please keep your letter to the point, and provide documentation to support your appeal. Be sure to keep a copy of your entire appeal, including any correspondence and documentation.
- 4. If you are an applicant, please provide a copy of your appeal to the service provider(s) affected by USAC's decision. If you are a service provider, please provide a copy of your appeal to the applicant(s) affected by USAC's decision.
- 5. Provide an authorized signature on your letter of appeal.

To submit your appeal to us by fax, fax your appeal to (973)599-6542.

To submit your appeal to us on paper, send your appeal to: Letter of Appeal Schools and Libraries Division - Correspondence Unit 30 Lanidex Plaza West PO Box 685 Parsippany, NJ 07054-0685

If you wish to appeal to the FCC, you should refer to CC Docket No. 02-6 on the first page of your appeal. Your appeal must be received by the FCC or postmarked within 60 days of the above date on this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. We strongly recommend that you use the electronic filing options described in "Appeals" posted on our website. If you are submitting your appeal via United States Postal Service, send to: FCC, Office of the Secretary, 445 12th Street SW, Washington, DC 20554.

Schools and Libraries Division Universal Service Administrative Company

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Entity Number 122736 Applicant's Form								
Contact Person ALBERTO MARSAC Phone Number 908 436-5061								
Block 5: Discount Funding Request(s) Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts. Make as many copies of this page as needed, and number the completed pages to assure that they are all processed correctly.								
10 If this is a duplicate Funding Request (e.g., of an FRN that is not etc.), check this box and enter the original FRN in the space prov	yet approved, under appeal, ided:							
Category of Service (only ONE category should be checked)	23 Calculations							
PRIORITY 1 Telecommunications Service PRIORITY 2 Internal Connections Other than Basic Maintenance	A. Monthly charges (total amount per month for service)							
Internet Access Basic Maintenance of Internal Connections	16,881.81							
12 Form 470 Application Number	B. How much of the amount in A is ineligible?							
13 SPIN - Service Provider Identification Number	C. Eligible monthly pre-discount amount (A minus B)							
14 Service Provider Name	D. Number of months service provided in funding year /2							
VERIZON NEW TERSEY, INC.	E. Annual pre-discount amount for eligible recurring charges (C x D) 202, 560-7							
15a Check this box if this Funding Request is for non-contracted tariffed or month-to-month services. Contract Number	F. Annual non-recurring charges							
16b 2009-501819	F. Annual non-recurring charges							
15c Check this box if this Funding Request is covered under a master contract (e contract negotiated by a third party, the learns and conditions of which are then made available to an eligible entity that purchases directly from the service provider).	G. How much of the amount in F is ineligible?							
15d Check this box if this Funding Request is a continuation of an FRN from a previous funding year based on a multi-year contract. If so, provide that FRN here:	0.00							
16a Billing Account Number (e.g., billed telephone number) 908-558-3000								
16b Check this box if there are multiple Billing Account Numbers and attach a complete list of those numbers to this page.	H. Annual eligible pre-discount amount for non-recurring charges (F minus G)							
Allowable Vendor Selection/Contract Date (mm/dd/yyyy) 17 11/27/2009	0.00							
Contract Award Date (mm/dd/yyyy) 18 01/21/2010	I. Total funding year pre-discount amount (E + H)							
19 Service Start Date (mm/dd/ysyy) 07/01/2012	202,560.71							
20a Service End Date (mm/dd/yyyy)	J. Discount from Block 4 Worksheet 90							
20b (mm/dd/yyyy) 86/30/2013	K. Funding Commitment Request (I x J) 182, 304.64							
21 Description of This Service: NOTE: All Item 21 Attachments must be filed before the close of the filing window. You MUST attach a description of the service, including a breakdown of components, costs, manufacturer name, make and model number. You must include any additional account or telephone numbers if the billed account has multiple numbers. Label the description with an Attachment 21 - CENTRES								
e. If the service is offer 22 Entity/Entities Receiving This Service: and not shared by other	Number, and note number in space provided. e. If the service is site-specific (provided to one site							
b. if the service is shared by all entities on a Block 4 worksheet list the worksheet number (e.g., 1):								

Entity Number 122796 Applicant's Form Identifier CENTREX										
Contact Person ALBERTO MARSAL	_ Phone Number	908 436-5061								
Block 6: Certifications and Signature 24 2 certify that the entities listed in Block 4 of this application are eligible for support because they are: (Check one or both.)										
a schools under the statutory definitions of elementary and secondary schools found in the No Child Left Behind Act of 2001, 20 U.S.C. §§ 7801(18) and (38), that do not operate as for-profit businesses and do not have endowments exceeding \$50 million; and/or										
b libraries or library consortia eligible for assistance from a State library administrative agency under the Library Services and Technology Act of 1996 that do not operate as for-profit businesses and whose budgets are completely separate from any schools, including, but not limited to, elementary, secondary schools, colleges, or universities.										
I certify that the entity I represent or the entities listed on this application have secured access, separately or through this program, to all of the resources, including computers, training, software, internal connections, maintenance, and electrical capacity, necessary to use the services purchased effectively. I recognize that some of the aforementioned resources are not eligible for support. I certify that the entities I represent or the entities listed on this application have secured access to all of the resources to pay the discounted charges for eligible services from funds to which access has been secured in the current funding year. I certify that the Billed Entity will pay the non-discount portion of the cost of the goods and services to the service provider(s).										
a Total funding year pre-discount amount on this Form 471 (Add the entries from Items 23I on all Block 5 Discount Fu	nding Requests.)	202,560.71								
b Total funding commitment request amount on this Form 45 (Add the entries from Items 23K on all Block 5 Discount Fo		182, 304.64								
Total applicant non-discount share (Subtract Item 25b from Item 25a.)		20,256,07								
d Total budgeted amount allocated to resources not eligible	for E-rate support	0.00								
Total amount necessary for the applicant to pay the non-diservices requested on this application AND to secure accessory to make effective use of the discounts. (Add its	ass to the resources	20,256.07								
f Check this box if you are receiving any of the funds in item 25e directly from a service provider listed on any of the Forms 471 filed by this Billed Entity for this funding year, or if a service provider listed on any of the Forms 471 filed by this Billed Entity for this funding year assisted you in locating funds in Item 25e.										
I certify that, if required by Commission rules, all of the individual schools and libraries receiving services under this form are covered by technology plans that do or will cover all 12 months of the funding year, and that have been or will be approved by a state or other authorized body or an SLD-certified technology plan approver prior to the commencement of service.										
Or Control of the con										
1 certify that the entity responsible for selecting the service p bidding requirements and that the entity or entities listed on	rovider(s) has reviewed all application have compiled with	ible FCC, state, and local procurement/competitive								
i certify that the services the applicant purchases at discour- not be sold, resold or transferred in consideration for money §§ 54.500, 54.513. Additionally, I certify that the entity or er anything of value, other than services and equipment sough thereof or any consultant in connection with this request for	or any other thing of value, except stitles listed on this application has to by means of this form, from the	It as permitted by the Commission's rules at 47 C.F.R.								
i certify that I and the entity(les) I represent have compiled a discount funding and/or cancellation of funding commitment except for those services provided under non-contracted tar program rules could result in civil or criminal prosecution by	 There are signed contracts con iffed or month-to-month arrangem 	rering all of the services listed on this Form 471								



December 4, 2013

ALBERTO MARSAL ELIZABETH SCHOOL DISTRICT 500 NORTH BROAD STREET ELIZABETH, NJ 07208-3302

Re: Applicant's Form Identifier: CENTREX Form 471 Application Number: 935749

We're sending this letter to notify you that your FCC Form 471 application and/or certification was received or postmarked AFTER the deadline for an application to to be considered as filed within the window. Applications submitted outside of the filing window will not be considered for funding unless funds remain after considering all in-window applications.

TO REQUEST A WAIVER OF THE FILING WINDOW DEADLINE:

The window filing requirement is contained in the Federal Communication Commission (FCC) rules for the E-rate program. USAC cannot consider requests for waivers of FCC rules. If you missed the FCC Form 471 filing window deadline and wish to request a waiver, you may file a waiver request with the FCC. You should refer to CC Docket No. 02-6 on the first page of your waiver request. We strongly recommend that you review "Appeals" posted in the Reference Area of the SLD section of the USAC website for electronic filing options and additional information on waiver requests.

TO APPEAL THIS DECISION:

If you disagree with the decision indicated in this letter - for example, if you believe that you postmarked your FCC Form 471 on or before the filing window deadline - you have the option of filing an appeal with USAC or with the FCC.

If you wish to appeal to USAC, your appeal must be received by USAC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. In your letter of appeal:

- Include the name, address, telephone number, fax number, and email address for the person who can most readily discuss this appeal with us.
- State outright that your letter is an appeal. Include the following to identify the decision letter and the decision you are appealing:

Appellant name,
 Applicant or service provider name,

- BEN

- Application number 935749 as assigned by USAC,
 "Funding Year 2012 FCC Form 471 Postmarked Outside of Window Letter,"
 AND
- The exact text or the decision that you are appealing.
- Please keep your letter to the point, and provide documentation to support your appeal. Be sure to keep a copy of your entire appeal, including any correspondence and documentation.
- 4. If you are an applicant, please provide a copy of your appeal to the service provider(s) affected by USAC's decision. If you are a service provider, please provide a copy of your appeal to the applicant(s) affected by USAC's decision.
- 5. Provide an authorized signature on your letter of appeal.

To submit your appeal to us by fax, fax your appeal to (973)599-6542.

To submit your appeal to us on paper, send your appeal to: Letter of Appeal Schools and Libraries Division - Correspondence Unit 30 Lanidex Plaza West PO Box 685 Parsippany, NJ 07054-0685

If you wish to appeal to the FCC, you should refer to CC Docket No. 02-6 on the first page of your appeal. Your appeal must be received by the FCC or postmarked within 60 days of the above date on this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. We strongly recommend that you use the electronic filing options described in "Appeals" posted on our website. If you are submitting your appeal via United States Postal Service, send to: FCC, Office of the Secretary, 445 12th Street SW, Washington, DC 20554.

Schools and Libraries Division Universal Service Administrative Company

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y all entities on a Block 4	b. If the service is shared by all entities on a Block 4 worksheet number (e.g., 1):
tto (provided to one site text the Entity Number of wing the senior:	2. If the service is site-specific (provided to one site and not shared by others), list the Entity Number of the entity from Block 4 receiving this service:
filled before the close of the filing window. Attachment name, make and model number. You anumbers. Label the description with an Attachment $21 - VW$	21 Description of This Service: NOTE: All Item 21 Attachments must be filed before the close of the filing window. You MUST attach a description of the service, including a breakdown of components, costs, manufacturer name, make and model number. You must include any additional account or telephone numbers if the billed account has multiple numbers. Label the description with an Attachment Number, and note number in space provided.
K. Funding Commitment Request (i x J) 4	20b (mm/dd/yyyy) 6-30-2013
	mm 6-30-2012
165, 357.60	Ē
$\overline{}$	-
0	Allowable Vendor Selection/Contract Date (mm/dd/yyyy) [2-13-20]
 H. Annual eligible pre-discount amount for non-recurring charges (F minus G) 	Check this box if there are multiple Billing Account Numbers and attach a complete list of those numbers to this page.
	16a Billing Account Number (e.g., billed telephone number) 485193791 - DDDD1
Non-l	Check this box if this Funding Request is a continuation of an FRN from a previous funding year based on a multi-year contract. If so, provide that FRN have:
G. How much of the amount in F is ineligible?	Check this box if this Funding Request is covered under a master contract (a contract negotiated by a third party, the terms and conditions of which are then made evaluate to an eighle entity that purchases directly from the service provider).
g Charge	State Master Contract A6428
\dashv	15a Check this box if this Funding Request is for non-contracted tariffed or month-to-month services.
E. Annual pre-discount amount for eligible recurring charges (C x D) 103,357,60	Varizon Wireless
1	14 Service Provider Name
C. Sinible monthly pre-discount amount (A minus B)	13 8PIN – Service Provider Identification Number 143 000 677
B. How much of the amount in A is ineligible?	12 Form 470 Application Number
8,779.80	Internet Access
A. Monthly changes (total amount per month for service)	PRIORITY 1 PRIORITY 2 Telecommunications Internal Connections Other than Besic Maintanance
23 Calculations	Category of Service (only ONE category should be checked)
t approved, under appeal, ed:	If this is a duplicate Funding Request (e.g., of an FRN that is not yet approved, under appeal etc.), check this box and enter the original FRN in the space provided:
Block 5, page of	Block 8: Discount Funding Request(s) Instructions: Use one Block 5 page for EACH service (Funding Request Number) for which you are requesting discounts. Make as many copies of this page as needed, and number the completed pages to assure that they are all processed correctly.
From Identifier Varizon Wiceless Phone Number 908-436-5061	Contact Person Alberto Marsal Applicant's Form Identifier
ı	

Entity	Number	122	791	0		Applicant	's Form Id	entifier	Ver	izon	Wire	Lless	_
Contac	t Person	Albe	rto	Mars	al	_	Phone	Number	908	-436	-506		_
Blo	ck 6:	Certi	ficat	ons a	nd Sig	nature							
24	24 I certify that the entities listed in Block 4 of this application are eligible for support because they are: (Check one or both.)												
a schools under the statutory definitions of elementary and secondary schools found in the No Child Left Behind Act of 2001, 20 U.S.C. §§ 7801(18) and (38), that do not operate as for-profit businesses and do not have endowments exceeding \$50 million; and/or													
Ilbraries or library consortia eligible for assistance from a State library administrative agency under the Library Services and Technology Act of 1996 that do not operate as for-profit businesses and whose budgets are completely separate from any schools, including, but not limited to, elementary, secondary schools, colleges, or universities.													
I certify that the entity I represent or the entities listed on this application have secured access, separately or through this program, to all of the resources, including computers, training, software, internal connections, maintenance, and electrical capacity, necessary to use the services purchased effectively. I recognize that some of the aforementioned resources are not eligible for support. I certify that the entities I represent or the entities listed on this application have secured access to all of the resources to pay the discounted charges for eligible services from funds to which access has been secured in the current funding year. I certify that the Billed Entity will pay the non-discount portion of the cost of the goods and services to the service provider(s).													
	Total fund (Add the	ding year pr entries from	e-discour Items 23	t amount on t on all Block	this Form 471	unding Reques	sts.)	10	5,	357	.50		
b					on this Form 4 k 5 Discount F		ests.)	9	4, 8	321.	84		
c		licant non-c							10, 5	35.	66		
d	Total bud	igeted amou	unt alloca	ed to resour	ces not eligible	for E-rate sup	pport			D			_
	Total amount necessary for the applicant to pay the non-discount share of the services requested on this application AND to secure access to the resources necessary to make effective use of the discounts. (Add Items 25c and 25d.)												
•	Check this box if you are receiving any of the funds in item 25e directly from a service provider listed on any of the Forms 471 filed by this Billed Entity for this funding year, or if a service provider listed on any of the Forms 471 filed by this Billed Entity for this funding year assisted you in locating funds in Item 25e.												
26 I certify that, if required by Commission rules, all of the individual schools and libraries receiving services under this form are sovered by technology plans that do or will cover all 12 months of the funding year, and that have been or will be approved by a state or other authorized body or an SLD-certified technology plan approver prior to the commencement of service.													
Or I certify that no technology plan is required by Commission rules.													
27 I certify that (if applicable) I posted my Form 470 and (if applicable) made any related RFP available for at least 28 days before considering all bids received and selecting a service provider. I certify that all bids submitted were carefully considered and the most cost-effective service offering was selected, with price being the primary factor considered, and is the most cost-effective means of meeting educational needs and technology plan goals.													
$\overline{}$	not be sok §§ 54.500 anything o	d, resold or , 54.513. A of value, oth	transferre dditionally er than se	d in consider . I certify that rvices and e	ases at discou ation for mone t the entity or o quipment soug this request fo	ey or any other entitles listed o tht by means o	r thing of val on this applic	ue, except ation have	t as pem e not rec	altted by the elved anythi	Commission ng of value o	's rules at 4 r a promise	47 C.F.F B of
/ \	I certify that I and the entity(ies) I represent have complied with all program rules and I acknowledge that failure to do so may result in denial of discount funding and/or cancellation of funding commitments. There are signed contracts covering to the services listed on this Form 471 except for those services provided under non-contracted tariffed or month-to-month arrangements. I acknowledge that failure to comply with program rules could result in civil or criminal program to by the appropriate law enforcement authorities.												





December 4, 2013

ALBERTO MARSAL ELIZABETH SCHOOL DISTRICT 500 NORTH BROAD STREET ELIZABETH, NJ 07208-3302

Re: Applicant's Form Identifier: VERIZON WIRELESS

Form 471 Application Number: 935770

We're sending this letter to notify you that your FCC Form 471 application and/or certification was received or postmarked AFTER the deadline for an application to to be considered as filed within the window. Applications submitted outside of the filing window will not be considered for funding unless funds remain after considering all in-window applications.

TO REQUEST A WAIVER OF THE FILING WINDOW DEADLINE:

The window filing requirement is contained in the Federal Communication Commission (FCC) rules for the E-rate program. USAC cannot consider requests for waivers of FCC rules. If you missed the FCC Form 471 filing window deadline and wish to request a waiver, you may file a waiver request with the FCC. You should refer to CC Docket No. 02-6 on the first page of your waiver request. We strongly recommend that you review "Appeals" posted in the Reference Area of the SLD section of the USAC website for electronic filing options and additional information on waiver requests.

TO APPEAL THIS DECISION:

If you disagree with the decision indicated in this letter - for example, if you believe that you postmarked your FCC Form 471 on or before the filing window deadline - you have the option of filing an appeal with USAC or with the FCC.

If you wish to appeal to USAC, your appeal must be received by USAC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. In your letter of appeal:

- 1. Include the name, address, telephone number, fax number, and email address for the person who can most readily discuss this appeal with us.
- 2. State outright that your letter is an appeal. Include the following to identify the decision letter and the decision you are appealing:

- Appellant name,

- Applicant or service provider name,

- BEN,

- Application number 935770 as assigned by USAC,
 "Funding Year 2012 FCC Form 471 Postmarked Outside of Window Letter,"
 AND
- The exact text or the decision that you are appealing.
- Please keep your letter to the point, and provide documentation to support your appeal. Be sure to keep a copy of your entire appeal, including any correspondence and documentation.
- 4. If you are an applicant, please provide a copy of your appeal to the service provider(s) affected by USAC's decision. If you are a service provider, please provide a copy of your appeal to the applicant(s) affected by USAC's decision.
- 5. Provide an authorized signature on your letter of appeal.

To submit your appeal to us by fax, fax your appeal to (973)599-6542.

To submit your appeal to us on paper, send your appeal to:
 Letter of Appeal
 Schools and Libraries Division - Correspondence Unit
 30 Lanidex Plaza West
 PO Box 685
 Parsippany, NJ 07054-0685

If you wish to appeal to the FCC, you should refer to CC Docket No. 02-6 on the first page of your appeal. Your appeal must be received by the FCC or postmarked within 60 days of the above date on this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. We strongly recommend that you use the electronic filing options described in "Appeals" posted on our website. If you are submitting your appeal via United States Postal Service, send to: FCC, Office of the Secretary, 445 12th Street SW, Washington, DC 20554.

Schools and Libraries Division Universal Service Administrative Company

Entity Number 122 796 Applicant's Form	n Identifier WEBHOSTING								
Contact Person ALBERTO MAKSAL Phone Number 908 436 5061									
Block 5: Discount Funding Request(s)									
Instructions: Use one Block 5 page for EACH service (Funding Request Num	ber) Block 5, page of								
for which you are requesting discounts. Make as many copies of this page as needed, and number the completed pages to assure that they are all processes	d correctly.								
10 If this is a duplicate Funding Request (e.g., of an FRN that is no etc.), check this box and enter the original FRN in the space pro									
11 Category of Service (only ONE category should be checked)	23 Calculations								
PRIORITY 1 Telecommunications Service PRIORITY 2 Internal Connections Other than Basic Maintenance	A. Monthly charges (total amount per month for service)								
Internet Access Basic Maintenance of Internal Connections	3705.41								
12 Form 470 Application Number	B. How much of the amount in A is ineligible? 333.49								
13 SPIN – Service Provider Identification Number	C. Eligible monthly pre-discount amount (A minus B)								
143026430 14 Service Provider Name	C. Eligible monthly pre-discount amount (A minus B)								
,	D. Number of months service provided in funding year /2								
School CENTER UBA BLACKBOARD ENGAGE	E. Annual pre-discount amount for eligible recurring charges (C x D) 40462.55								
15a Check this box if this Funding Request is for non-contracted tariffed or month-to-month services.	999								
Contract Number	F. Annual non-recurring charges								
N/A	-0.00								
15c Check this box if this Funding Request is covered under a master contract (a contract negotiated by a third party, the terms and conditions of which are then made available to an eligible entity that purchases directly from the service provider).	G. How much of the amount in F is ineligible?								
15d Check this box if this Funding Request is a continuation of an FRN from a previous funding year based on a multi-year contract. If so, provide that FRN here:	-0.00								
16a Billing Account Number (e.g., billed telephone number)									
OOEQX	- 0.00								
16b Check this box if there are multiple Billing Account Numbers and attach a complete list of those numbers to this page.	H. Annual eligible pre-discount amount for non-recurring charges (F minus G)								
17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) 12 - 13 - 2010	-0.00								
Contract Award Date (mm/dd/yyyy) 18 /-21-2011	Total funding year pre-discount amount (E + H)								
19 Service Start Date (mm/dd/yyyy) 7-1-2011	40, 462.98 J. Discount from Block 4 Worksheet 90								
20a Service End Date (mm/dd/yyyy) 6-30-2012	J. Discount from Block 4 Worksheet 90								
20b (mm/dd/yyyy) 6-30-2014	K. Funding Commitment Request (1 x J) 36416.68								
21 Description of This Service: NOTE: All Item 21 Attachments must be filed before the close of the filing window. You MUST attach a description of the service, including a breakdown of components, costs, manufacturer name, make and model number. You must include any additional account or telephone numbers if the billed account has multiple numbers. Label the description with an Attachment Number, and note number in space provided.									
22 Entity/Entities Receiving This Service: and not shared by other	specific (provided to one site pra), list the Entity Number of receiving this service:								
b. if the service is shared by all entitles on a Block 4 worksheet, list the worksheet number (e.g., 1):									

Entity	Number 127796		WEBHOSTING
	CT Person ALBERTO MARSAL	Phone Number _	908 436 5061
Block 6: Certifications and Signature			
24 [24] I certify that the entities listed in Block 4 of this application are eligible for support because they are: (Check one or both.)			
	schools under the statutory definitions of elementary and secondary schools found in the No Child Left Behind Act of 2001, 20 U.S.C. § 7801(18) and (38), that do not operate as for-profit businesses and do not have endowments exceeding \$50 million; and/or		
1	b iibraries or library consortia eligible for assistance fi Act of 1996 that do not operate as for-profit busines limited to, elementary, secondary schools, colleges	uses and whose budgets are complete	
I certify that the entity I represent or the entities listed on this application have secured access, separately or through this program, to all of the resources, including computers, training, software, internal connections, maintenance, and electrical capacity, necessary to use the services purchased effectively. I recognize that some of the aforementioned resources are not eligible for support. I certify that the entities I represent or the entities listed on this application have secured access to all of the resources to pay the discounted charges for eligible services from funds to which access has been secured in the current funding year. I certify that the Billed Entity will pay the non-discount portion of the cost of the goods and services to the service provider(s).			
	Total funding year pre-discount amount on this Form 471 (Add the entries from Items 23I on all Block 5 Discount Fu	nding Requests.)	4046298
b	Total funding commitment request amount on this Form 4 (Add the entries from Items 23K on all Block 5 Discount F		36416.68
c	Total applicant non-discount share (Subtract item 25b from item 25a.)		4046.30
d	Total budgeted amount allocated to resources not eligible	for E-rate support	0
Total amount necessary for the applicant to pay the non-discount share of the			
•	services requested on this application AND to secure acc necessary to make effective use of the discounts. (Add to	ess to the resources	4046.30
1	Check this box if you are receiving any of the funds in Item 25e directly from a service provider listed on any of the Forms 471 filed by this Billed Entity for this funding year, or if a service provider listed on any of the Forms 471 filed by this Billed Entity for this funding year assisted you in locating funds in Item 25e.		
I certify that, if required by Commission rules, all of the individual schools and libraries receiving services under this form are covered by technology plans that do or will cover all 12 months of the funding year, and that have been or will be approved by a state or other authorized body or an SLD-certified technology plan approver prior to the commencement of service. Or i certify that no technology plan is required by Commission rules.			
received and selecting a service provider. I certify that all bids submitted we're carefully considered and the most cost-effective service offering was selected, with price being the primary factor considered, and is the most cost-effective means of meeting educational needs and technology plan goals.			
I certify that the entity responsible for selecting the service provider(s) has reviewed all applicable FCC, state, and local procurement/competitive bidding requirements and that the entity or entities listed on this application have compiled with them.			
29	I certify that the services the applicant purchases at discounts provided by 47 U.S.C. § 254 will be used primarily for educational purposes and will not be sold, resold or transferred in consideration for money or any other thing of value, except as permitted by the Commission's rules at 47 C.F.F. §§ 54.500, 54.513. Additionally, I certify that the entity or entities listed on this application have not received anything of value or a promise of anything of value, other than services and equipment sought by means of this form, from the service provider, or any representative or agent thereof or any consultant in connection with this request for services.		
30	I certify that I and the entity(les) I represent have compiled with all program rules and I acknowledge that failure to do so may result in denial of discount funding and/or cancellation of funding commitments. There are signed contracts covering all of the services listed on this Form 471 except for those services provided under non-contracted tariffed or month-to-month arrangements. I acknowledge that failure to comply with program rules could result in civil or criminal prosecution by the appropriate law enforcement authorities.		